# 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	PAGE 1 OF 8 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
The 2016 Committee	C C00569905
	M = M / D = D / Y = Y = Y
Check if24-hour report 48-hour report New report Amends report fil	
Full Name of Payee A1 VAN AD ITEMS	Date of Public Distribution/Dissemination
	10 15 2015
Mailing Address 3290 VAN DRIVE	Amount
City State Zip Code	9590.00
BURLINGTON NC 27215-9000	Transaction ID : SE24.1283  Date of Disbursement or Obligation
Purpose of Expenditure FULFILLMENT ITEMS - SIGNS & STICKERS  Category/ Type 004	10 15 / Y Y Y Y Y Y
Name of Federal Candidate Support Of	fice Sought: House District:
DR. BEN CARSON Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought  Dis 20	sbursement For:
Full Name of Payee	Date of Public Distribution/Dissemination
AMP CALYPSO, INC.	10 15 2015
Mailing Address 9 PITCH PINE ROAD	Amount
City State Zip Code	4200.00
ALBANY NY 12203	Transaction ID : SE24.1277 Date of Disbursement or Obligation
Purpose of Expenditure FULFILLMENT ITEMS - CLOTHING  Category/ Type  004	10 15 / Y Y Y Y
	fice Sought: House District:
DR. BEN CARSON Oppose	President Senate State:
	sbursement For:
(a) SUBTOTAL of Itemized Independent Expenditures	13790.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not with, or at the request or suggestion of, any candidate or authorized committee or agent of eit party committee) any political party committee or its agent.	
Robert Frank [Electronically Filed] Date	02 09 2016
Signature	

#### : 97 A = G7 9 @ G B 9 C I G H 9 L H F 9 @ 5 H 9 8 H C 5 F 9 D C F H Z G7 < 98 I @ C F H 9 A = N 5 H C B

Form/Schedule: SE

Transaction ID : SE24.1283

The expenditures made to support this candidate were done on a nationwide basis and did not focus on any particular state or a group of states. \$188.04 has been allocated equally to each of the remaining schedule primary elections.

Form/Schedule: SE

Transaction ID: SE24.1277

The expenditures made to support this candidate were done on a nationwide basis and did not focus on any particular state or a group of states. \$82.35 has been allocated equally to each of the remaining schedule primary elections.

### 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	ENT EXI END			PAGE 3 OF 8 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC	IDENTIFICATION NUMBER ▼
The 2016 Committee			C	C00569905
				0000000
Check if 24-hour report X 48-hour report	New repo	ort Amends repo	ort filed on	/ D = D / Y = Y = Y
Full Name of Payee BIEBER COMMUNICATIONS			Date of Pu	blic Distribution/Dissemination
			10	15 2015
Mailing Address 3609 W. MACARTHUR BLVD			Amount	
#812	Ctata	7'- O-do		14124.00
City SANTA ANA	State CA	State Zip Code CA 92704-6850		14124.00 on ID : SE24.1278
Purpose of Expenditure			Date of Dis	sbursement or Obligation
FULFILLMENT ITEMS - SUPPORTER CARDS		Category/ Type 004	10	/ 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate		X Support	Office Sought:	House District:
DR. BEN CARSON		Oppose	X President	Senate State:
Calendar Year-To-Date Per Election for Office Sought	33	321603.52	Disbursement For 2016	: ☐ Primary ☐ General (specify) ►
Full Name of Payee				ublic Distribution/Dissemination
LAMAR ADVERTISING			M = M	/ D D / Y Y Y Y
Mailing Address 5321 CORPORATE BLVD			10	15 2015
332. 33 22			Amount	
City	State	Zip Code		5000.00
BATON ROUGE	LA	70808		n ID : SE24.1279 sbursement or Obligation
Purpose of Expenditure BILLBOARD		Category/ 004	М - М	/ D D / Y Y Y
BILLBOAKD		Type 004	10	15 2015
Name of Federal Candidate		X Support	Office Sought:	House District:
DR. BEN CARSON		Oppose	X President	Senate State: RI
Calendar Year-To-Date		69717.04	Disbursement For 2016	: Primary General
Per Election for Office Sought		30711.01		(specify) ▶
	•••			
(a) SUBTOTAL of Itemized Independent Expendent	ditures		. •	19124.00
(b) SUBTOTAL of Unitemized Independent Exp	enditures			
				7
(c) TOTAL Independent Expenditures			<b>•</b>	7   1 7   1 7
Under penalty of perjury I certify that the indep with, or at the request or suggestion of, any car party committee) any political party committee or	ndidate or authorized			
Robert Frank	[Electron	nically Filed] Date	9 02 09	
Signature				

## : 97 A = G7 9 @ G5 B9 CI G'H9 LHF9 @ 5 H98 'HC' 5 F9 DCF Hz G7 < 98 I @ 'CF' + H9 A = N5 H+CB

Form/Schedule: SE

Transaction ID : SE24.1278

The expenditures made to support this candidate were done on a nationwide basis and did not focus on any particular state or a group of states. \$276.94 has been allocated equally to each of the remaining schedule primary elections.

Form/Schedule: Transaction ID:

# 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E)	FOR SE OF FORM 24/48
IAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
The 2016 Committee	C C00569905
	O
Check if 24-hour report X 48-hour report New report Amends report filed	on M M / D D / Y Y Y Y Y
Full Name of Payee MULTIVIEW, INC.	Date of Public Distribution/Dissemination
,	10 15 2015
Mailing Address 163 WATERFRONT STREET	Amount
SUITE 300	2500.00
City State Zip Code  NATIONAL HARBOR MD 20745	3500.00 Transaction ID : SE24.1280
Purpose of Evpanditure	Date of Disbursement or Obligation
AGENCY FEES - MEDIA CONSULTING  Category/ Type  004	10 15 2015
	Sought: House District:
DR. BEN CARSON Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought  Disbut 2016	orsement For:
Full Name of Payee	Date of Public Distribution/Dissemination
PINKSTON DIGITAL INC	10 15 2015
Mailing Address 5270 SHAWNEE ROAD SUITE 102	
SUITE 102	Amount
City State Zip Code	12000.00
ALEXANDRIA VA 22312	Transaction ID : SE24.1281 Date of Disbursement or Obligation
Purpose of Expenditure WEB DESIGN & DEVELOPMENT  Category/ Type  004	10 15 / Y Y Y Y
Name of Federal Candidate Support Office	e Sought: House District:
DR. BEN CARSON Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought  Disbut 2016	
	Other (specify) -
(a) SUBTOTAL of Itemized Independent Expenditures	15500.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not may with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
Robert Frank [Electronically Filed] Date 0	2 09 2016
Signature	

## : 97 A = G7 9 @ 5 B9 CI G'H9 LHF9 @ 5 H98 'HC' 5 F9 DCFHz G7 < 98 I @ 'CF' ± H9 A ± N5 H± CB

Form/Schedule: SE

Transaction ID : SE24.1280

The expenditures made to support this candidate were done on a nationwide basis and did not focus on any particular state or a group of states. \$68.63 has been allocated equally to each of the remaining schedule primary elections.

Form/Schedule: SE

Transaction ID: SE24.1281

The expenditures made to support this candidate were done on a nationwide basis and did not focus on any particular state or a group of states. \$235.29 has been allocated equally to each of the remaining schedule primary elections.

## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 7 OF 8 FOR SE OF FORM 24/48			
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼			
The 2016 Committee	C C00569905			
Check if 24-hour report X 48-hour report New report Amends report filed on	W = M / D = D / Y = Y = Y = Y			
Full Name of Payee Date	of Public Distribution/Dissemination			
	10 15 Y 2015			
Mailing Address 6762 DOUGLAS AVENUE  Amou	unt			
City State Zip Code	461.10			
Date	saction ID : SE24.1282 of Disbursement or Obligation			
Purpose of Expenditure FULFILLMENT ITEMS - LABELS  Category/ Type  004	10 / 15 / 2015			
Name of Federal Candidate Support Office Sough	ht: House District:			
DR. BEN CARSON Oppose Presid	lent Senate State:			
Calendar Year-To-Date Per Election for Office Sought  Disbursemer 2016	nt For:			
	of Public Distribution/Dissemination			
Mailing Address				
Amou	unt			
City State Zip Code				
	of Disbursement or Obligation			
Purpose of Expenditure  Category/ Type	M = M / D = D / Y = Y = Y			
Name of Federal Candidate Support Office Sough	ht: House District:			
Oppose Presid	dent Senate State:			
Calendar Year-To-Date Per Election for Office Sought  Disbursemen	nt For:			
	Strict (specify) F			
(a) SUBTOTAL of Itemized Independent Expenditures	461.10			
(b) SUBTOTAL of Unitemized Independent Expenditures				
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Robert Frank [Electronically Filed] Date 02	09 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Signature				

## : 97 A = G7 9 @ G5 B9 CI G'H9 LHF9 @ 5 H98 'HC' 5 F9 DCF Hz G7 < 98 I @ 'CF' + H9 A = N5 H+CB

Form/Schedule: SE

Transaction ID : SE24.1282

The expenditures made to support this candidate were done on a nationwide basis and did not focus on any particular state or a group of states. \$9.04 has been allocated equally to each of the remaining schedule primary elections.

Form/Schedule: Transaction ID: